

# STRP RENEWAL AFFIDAVIT

Comes now affiant \_\_\_\_\_, designated representative for Short Term Rental Property ("STRP") Permit # \_\_\_\_\_ for the property located at \_\_\_\_\_ and states as follows, based upon the affiant's personal knowledge:

1. That I am over the age of eighteen and competent to provide this Affidavit.
2. That I am the designated representative for STRP Permit # \_\_\_\_\_.
3. That I wish to continue the permitted operation of an STRP at \_\_\_\_\_, pursuant to MCL 17.16.070U.
4. That the floor plan at the permitted address has not changed since the prior STRP inspection and approval by the Metro Fire Marshal.
5. That I possess the full insurance coverage for the STRP, as required by MCL 17.16.070U.
6. That I have paid all applicable taxes related to this permit and this land use.
7. That I have not violated the requirements for operation of a permitted STRP, pursuant to MCL 17.16.070U.

FURTHER, AFFIANT SAITH NOT:

\_\_\_\_\_

SIGNATURE

\_\_\_\_\_

DATE

Affiant's PRINTED Name \_\_\_\_\_

Affiant's Address \_\_\_\_\_

\_\_\_\_\_

## CONTACT INFORMATION FOR RESPONSIBLE PARTY WITHIN 25 MILE RADIUS OF THE SUBJECT PROPERTY

First/Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

COUNTY OF DAVIDSON            )  
STATE OF TENNESSEE            )

Before me, a notary public for said county and said state, appeared \_\_\_\_\_,  
with whom I am personally acquainted or proved to me on the basis of satisfactory evidence, and who  
acknowledged that he is the Representative for STRP Permit # \_\_\_\_\_, and that  
in the capacity of Representative executed the foregoing Affidavit for the purposes therein contained.

This the \_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_

My Commission Expires: \_\_\_\_\_